

FEC FORM 5**REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED**

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1. (a) Name of Individual, Organization or Corporation League of Conservation Voters, Inc.		3. FEC Identification Number C C90005786
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1920 L St NW Suite 800		
(c) City, State and ZIP Code Washington DC 20036-		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year-End Report
- ☐ 24-Hour Report
☒ 48-Hour Report

b) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM

MM / DD / YYYY
03 / 29 / 2012
THROUGH
MM / DD / YYYY
04 / 23 / 2012

6. TOTAL CONTRIBUTIONS

0.00

7. TOTAL INDEPENDENT EXPENDITURES

17978.22

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

[Electronically Filed]

Patrick Collins

Patrick Collins

04/24/2012

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 2 OF 4
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NAME OF FILER (In Full)

League of Conservation Voters, Inc.

Full Name (Last, First, Middle Initial) of Payee Hilltop Public Solutions		Date MM / DD / YYYY 03 / 29 / 2012	
Mailing Address 1000 Potomac Street NW #500		Amount 4000.00	
City Washington	State DC	Zip Code 20007	
Purpose of Expenditure Monthly Management Fee		Category/ Type	Office Sought: <input type="checkbox"/> House State: MT <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Jon Tester		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 83109.90		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Carson Pfingston		Date MM / DD / YYYY 03 / 30 / 2012	
Mailing Address 825N 18th Street		Amount 2592.33	
City Billings	State MT	Zip Code 59101-0330	
Purpose of Expenditure Salary		Category/ Type	Office Sought: <input type="checkbox"/> House State: MT <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Jon Tester		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 85702.23		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Carson Pfingston		Date MM / DD / YYYY 04 / 13 / 2012	
Mailing Address 825N 18th Street		Amount 2592.33	
City Billings	State MT	Zip Code 59101-0330	
Purpose of Expenditure Salary		Category/ Type	Office Sought: <input type="checkbox"/> House State: MT <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Jon Tester		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 88294.56		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		9184.66	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)			

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NAME OF FILER (In Full)

League of Conservation Voters, Inc.

Full Name (Last, First, Middle Initial) of Payee CenturyLink		Date MM / DD / YYYY 04 / 17 / 2012	
Mailing Address P.O. Box 29040		Amount 680.26	
City Phoenix	State AZ	Zip Code 85038	
Purpose of Expenditure Phone and Internet		Category/ Type	Transaction ID : A4DD3077003F049318B8
Name of Federal Candidate Supported or Opposed by Expenditure: Jon Tester		Office Sought: <input type="checkbox"/> House State: MT <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
88974.82			
Full Name (Last, First, Middle Initial) of Payee CenturyLink		Date MM / DD / YYYY 04 / 23 / 2012	
Mailing Address P.O. Box 29040		Amount 232.58	
City Phoenix	State AZ	Zip Code 85038	
Purpose of Expenditure Phone and Internet		Category/ Type	Transaction ID : A967A125DF8E1452FB89
Name of Federal Candidate Supported or Opposed by Expenditure: Jon Tester		Office Sought: <input type="checkbox"/> House State: MT <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
97088.12			
Full Name (Last, First, Middle Initial) of Payee Hilltop Public Solutions		Date MM / DD / YYYY 04 / 23 / 2012	
Mailing Address 1000 Potomac Street NW #500		Amount 4080.72	
City Washington	State DC	Zip Code 20007	
Purpose of Expenditure Monthly Management Fee		Category/ Type	Transaction ID : A77E4939FC87D44E99A3
Name of Federal Candidate Supported or Opposed by Expenditure: Jon Tester		Office Sought: <input type="checkbox"/> House State: MT <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
97088.12			
(a) SUBTOTAL of Itemized Independent Expenditures.....		4993.56	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)			

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 4 OF 4
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NAME OF FILER (In Full)

League of Conservation Voters, Inc.

Full Name (Last, First, Middle Initial) of Payee Summit Property Management, LLC		Date MM / DD / YYYY 04 / 23 / 2012	
Mailing Address 500 N. Higgins, #208		Amount 1600.00	
City Missoula	State MT	Zip Code 59807	
Purpose of Expenditure Missoula Office Rent		Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Jon Tester		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97088.12		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee ERCS, LLC		Date MM / DD / YYYY 04 / 23 / 2012	
Mailing Address P.O. Box 21254		Amount 1300.00	
City Billings	State MT	Zip Code 59104	
Purpose of Expenditure Billings Office Rent		Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Jon Tester		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97088.12		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Carson Pfingston		Date MM / DD / YYYY 04 / 23 / 2012	
Mailing Address 825N 18th Street		Amount 900.00	
City Billings	State MT	Zip Code 59101-0330	
Purpose of Expenditure Monthly Travel Stipend		Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Jon Tester		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 97088.12		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		3800.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)		17978.22	